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DEC 17 2004

PATENT APPLICATION

|  |  |                   |   |                                       |                              |                          |
|--|--|-------------------|---|---------------------------------------|------------------------------|--------------------------|
| <b>FEE AUTHORIZATION / AMENDMENT TRANSMITTAL</b>   |  |                   |   |                                       | Attorney's Docket No: 3151-A |                          |
| Serial No.<br>10/061,727   | Filing Date<br>October 26, 2001                  | Examiner<br>R. Li | Group Art Unit<br>1646                          |                                       |                              |                          |
| In Re Application of John E. Sims and Dirk E. Smith<br>For IL-1 RECEPTOR ACCESSORY PROTEIN   |  |                   |   |                                       |                              |                          |
| TO THE COMMISSIONER FOR PATENTS:   |  |                   |   |                                       |                              |                          |
| <input checked="" type="checkbox"/> Applicant(s) request(s) the following extension of time under 37 CFR 1.136(a): <ul style="list-style-type: none"> <li><input type="checkbox"/> One month of original due date (\$120.00)</li> <li><input type="checkbox"/> Two months of original due date (\$450.00)</li> <li><input checked="" type="checkbox"/> Three months of original due date (\$1,020.00)</li> <li><input type="checkbox"/> Four months of original due date (\$1,590.00)</li> <li><input type="checkbox"/> Five months of original due date (\$2,160.00)</li> </ul>   |  |                   |   |                                       |                              |                          |
| <input checked="" type="checkbox"/> A response in connection with the matter for which this extension is requested: <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Is filed herewith.</li> <li><input type="checkbox"/> has been filed.</li> <li><input type="checkbox"/> The response is the filing of a continuing application, the prior application having an express abandonment conditioned on the granting of a filing date to the continuing application.</li> </ul>   |  |                   |   |                                       |                              |                          |
| <input checked="" type="checkbox"/> The accompanying papers include amended claims for which no additional fee is required.<br><input type="checkbox"/> The accompanying papers include amended claims the fee for which has been calculated as follows:   |  |                   |   |                                       |                              |                          |
| <b>CLAIMS AS AMENDED</b>   |  |                   |   |                                       |                              |                          |
| (1)  | (2)<br>Claims<br>remaining<br>After<br>amendment | (3)               | (4)<br>Highest number<br>Previously paid<br>for | (5)<br>No. of Extra<br>claims present | (6)<br>Rate                  | (7)<br>Additional<br>Fee |
| Total Claims   |  | Minus             | =   | 0                                     | x \$50                       | = \$ 0.00                |
| Indep. Claims  |  | Minus             | =   | 0                                     | x \$200                      | = \$ 0.00                |
| <input type="checkbox"/> First Appearance of a multiple dependent claim  |  |                   |   |                                       | +                            | \$360                    |
| Total Additional Fee for this Amendment  |  |                   |   |                                       |                              | \$ 0.00                  |
| <p>* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.<br/>         ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.<br/>         *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.<br/>         The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col 1. of a prior amendment or the number of claims originally filed.</p> <p><input type="checkbox"/> The following other fees are incurred by the accompanying papers.<br/> <input type="checkbox"/> Other: _____</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account No. 09-0089 in the name of Immunex Corporation in the amount of \$1020.00. A duplicate copy of this petition is attached.</p> <p><input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a request therefore.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 09-0089.</p> |  |                   |   |                                       |                              |                          |
| Please Send Future Correspondence To:  |  |                   |   |                                       |                              |                          |
| <div style="display: flex; justify-content: space-between;"> <div> <b>22932</b><br/>           Immunex Corporation<br/>           Law Department<br/>           1201 Argen Court West<br/>           Seattle, Washington 98119-3105<br/>           (206) 265-7000         </div> <div> <br/>           Janis C. Henry<br/>           Attorney/Agent for Applicants<br/>           Registration No.: 34,347<br/>           Phone: (206) 265-7189<br/>           Date: December 17, 2004         </div> </div>   |  |                   |   |                                       |                              |                          |

## CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on the date indicated below.

Signed:   
Nanci M. Kertson

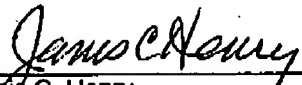
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PATENT APPLICATION

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| Total Additional Fee for this Amendment  |  |                                 |   |   |             | \$ 0.00                      |                 |
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| 22932  |  |                                 |   | <br>James C. Henry<br>Attorney/Agent for Applicants<br>Registration No.: 34,347<br>Phone: (206) 265-7189<br>Date: December 17, 2004 |             |                              |                 |
| Immunex Corporation<br>Law Department<br>1201 Amgen Court West<br>Seattle, Washington 98119-3105<br>(206) 265-7000   |  |                                 |   |   |             |                              |                 |

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Signed:   
Nanci M. Kertson

Date: Dec. 17, 2004

Appl. No. 10/061,727  
Amdt. dated December 17, 2004  
Resp. to Advisory Action dated Sept. 9, 2004

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In the Application of:  
John E. Sims and Dirk E. Smith

Attorney Docket No. 3151-A

Serial No.: 10/061,727

Group Art Unit: 1646

Filed: October 26, 2001

Examiner: Li, Ruixiang

For: IL-1 Receptor Accessory Protein

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Amendment and Response  
To Advisory Action**

Dear Sir:

Responsive to the Advisory Action mailed September 9, 2004 in connection with the above-identified US patent application, Applicants amend the application as follows:

Amendments to the Claims start on page 2 of this paper.

Remark begin on page 4 of this paper.